



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

BIBDATASHEET

Bib Data Sheet

CONFIRMATION NO. 4634

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|----------------------------------|
| SERIAL NUMBER 09/763,350 | FILING DATE 02/21/2001 RULE | CLASS 370 | GROUP ART UNIT 2662 | ATTORNEY DOCKET NO. Q63219 |
|-----------------------------|---------------------------------------|--------------|------------------------|----------------------------------|

APPLICANTS

Sylvain Lauro, Villejuif, FRANCE;

Jean-Laurent Plateau, Romilly sur Aigne, FRANCE;

** CONTINUING DATA *1-mm* *****

This application is a 371 of PCT/FR00/01862 06/30/2000

** FOREIGN APPLICATIONS *1-mm* *****

FRANCE 99440174.3 07/02/1999

| | | | | | | |
|--|---|-----------------------|-------------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>[Signature]</i> Examiner's Signature | <i>mm</i> Initials | STATE OR COUNTRY FRANCE | SHEETS DRAWING 3 | TOTAL CLAIMS 12 | INDEPENDENT CLAIMS 1 |
|--|---|-----------------------|-------------------------------|------------------------|-----------------------|----------------------------|

ADDRESS
Sughrue Mion Zinn
Macpeak & Seas
2100 Pennsylvania Avenue NW
Washington , DC
20037-3213

TITLE

Method for allocating/sharing resources among several of a communication network subscribers

| | | |
|-----------------------------------|---|---|
| FILING FEE RECEIVED 860 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|-----------------------------------|---|---|